

## PART B - FEE(S) TRANSMITTAL

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26621 7590 09/01/2005

THE SCRIPPS RESEARCH INSTITUTE  
OFFICE OF PATENT COUNSEL, TPC-8  
10550 NORTH TORREY PINES ROAD  
LA JOLLA, CA 92037

12/05/2005 RHEBRAH1 00000077 502235 10646919

01 FC:1501 1400.00 DA  
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|                   |                    |
|-------------------|--------------------|
| Sara Hare         | (Depositor's name) |
|                   | (Signature)        |
| November 30, 2005 | (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/646,919      | 08/21/2003  | Carlos F. Barbas     | TSRI 645.2 C1       | 1946             |

TITLE OF INVENTION: ZINC FINGER BINDING DOMAINS FOR GNN

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1400    | \$300           | \$1700           | 12/01/2005 |

| EXAMINER         | ART UNIT | CLASS-SUBCLASS |
|------------------|----------|----------------|
| CARLSON, KAREN C | 1653     | 530-350000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Catalyst Law Group  
 2. Michael B. Farber, Esq.  
 3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The Scripps Research Institute

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

La Jolla, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 502235 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Michael B. Farber*  
 Michael B. Farber, Esq.

Date

November 30, 2005

Typed or printed name

Registration No.

32,612

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